2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48419

Address:

City-St-Zip:

1327 ARTHUR ST

ORLANDO, FL 32804

FILED May 28, 2009 Secretary of State

Entity Name: CENTRAL FLORIDA REALTY INVESTORS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 55 SKYLINE DR STE 2850 LAKE MARY, FL 32746 **New Mailing Address: Current Mailing Address:** 55 SKYLINE DR STE 2850 LAKE MARY, FL 32746 US FEI Number: 59-3117856 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KISER, CHERYL T BENTLEY, LENORE I 55 SKÝLINE DR 55 SKYLINE DR **SUITE 2850** SUITE 2850 LAKE MARY, FL 32746 US LAKE MARY, FL 32746 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: LENORE BENTLEY 05/28/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BOLTON, JON Name: Name: 4389 DOLLY CT Address: Address: City-St-Zip: OVIEDO, FL 32765 City-St-Zip: Title: PD Title: PD () Delete (X) Change () Addition SLEAP, ADAM Name: ALLEN, FRED Name: Address: 1429 YATES ST Address: P.O. BOX 137172 City-St-Zip: ORLANDO, FL 32804 City-St-Zip: CLERMONT, FL 34713 Title: () Delete Title: VD. (X) Change () Addition PETTY, CHUCK PETTY, CHUCK Name: Name: 6024 BENT PINE DRIVE, #2813 6024 BENT PINE DRIVE, #2813 Address: Address: City-St-Zip: ORLANDO, FL 32822 City-St-Zip: ORLANDO, FL 32822 Title: () Delete Title: TD (X) Change () Addition Name: HEAVENER, MICHAEL Name: WALWYN, LEROY Address: 3823 LAKE SARAH DRIVE Address: 2457 S HIAWASSEE ROAD A112 ORLANDO, FL 32804 City-St-Zip: City-St-Zip: ORLANDO, FL 32835 Title: () Delete Title: (X) Change () Addition EDMOND, SANDRA EDMOND, SANDRA Name: Name: PO BOX 677521 PO BOX 677521 Address: Address: City-St-Zip: ORLANDO, FL 32867 City-St-Zip: ORLANDO, FL 32867 Title: () Delete Title: (X) Change () Addition HEFKA, BRUCE SPAZIANO, LEE Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

437 E. CENTER STREET

ORLANDO, FL 32701

SIGNATURE: FRED ALLEN PD 05/28/2009